



Department of the Treasury

Federal Law Enforcement Agencies

PROCESS RECEIPTS AND RETURNS

PLANTIFF United States of America		COURT CASE NUMBER 19-CR-245	
DEFENDANT Kyle Caton		TYPE OF PROCESS Disposal	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO BE SERVED OR DESCRIPTION OF PROPERTY TO SEIZE.		
	ADDRESS (Street or RFD, Apartment No., City, State and Zip Code)		
SEND NOTICE OR SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		NUMBER OF PROCESS TO BE	
Antoinette T. Bacon, Acting United States Attorney United States Attorney's Office 218 James T. Foley Courthouse 445 Broadway Albany, New York 12207		SERVED IN THIS CASE	
		NUMBER OF PARTIES TO BE	
		SERVED IN THIS CASE	
		CHECK BOX IF SERVICE IS ON USA	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Includes Business and Alternate Addresses, Telephone Numbers, and Estimated Times Available For Service) Please dispose of the property listed below in accordance with law.			
(1) A custom-built desktop computer tower, encased within a Rosewill Thor computer tower case, containing a Western Digital Red Pro 3 terabyte hard drive, s/n: WMC5D0D3055S and 2) a SAMSUNG 850 EVO 1 terabyte solid-state drive, s/n: S21CNWAG213562D			
Signature of Attorney or other Originator requesting service on behalf of: s/Emily C. Powers/ by jag		TELEPHONE NO. 518-431-0247	DATE 9/30/21
SIGNATURE AND DATE OF PERSON ACCEPTING PROCESS.			
SPACE BELOW FOR USE OF TREASURY LAW ENFORCEMENT AGENCY			
I acknowledge receipt for the total number of process indicated.	District of Origin No. _____	District to Serve No. _____	SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER.
			DATE 10-01-21
I HEREBY CERTIFY AND RETURN THAT I <input type="checkbox"/> PERSONALLY SERVED <input type="checkbox"/> HAVE LEGAL EVIDENCE OF SERVICE, <input type="checkbox"/> HAVE EXECUTED AS SHOWN IN "REMARKS". THE PROCESS DESCRIBED ON THE INDIVIDUAL, COMPANY, CORPORATION, ETC., AT THE ADDRESS SHOWN ABOVE OR ON THE ADDRESS INSERTED BELOW.			
<input type="checkbox"/> I HEREBY CERTIFY AND RETURN THAT I AM UNABLE TO LOCATE THE INDIVIDUAL, COMPANY, CORPORATION, ETC. NAMED ABOVE.			
NAME & TITLE OF INDIVIDUAL SERVED IF NOT SHOWN ABOVE		<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
ADDRESS: (Complete only if different than shown above)		DATE OF SERVICE 12-2-21	TIME OF SERVICE <input type="checkbox"/> AM <input type="checkbox"/> PM.
		SIGNATURE, TITLE AND TREASURY AGENCY	
REMARKS: Destroyed 12-2-21. Item #2 located inside Item #1.			